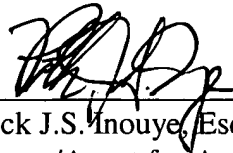


The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

Applicant requests that the information disclosed herein be made of record in this application.

Respectfully submitted,

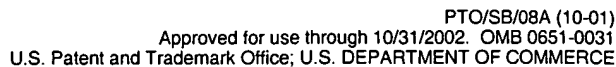


Patrick J.S. Inouye, Esq.
Attorney/Agent for Applicant(s)
Reg. No. 40297

Law Offices of Patrick J.S. Inouye
810 Third Avenue, Suite 258
Seattle, WA 98104
(206) 381-3900
(206) 381-3999

Date: September 22, 2003

Telephone No.: (206) 381-3900



Substitute for form 1449A/PTO				Complete if Known <table border="1"> <tr> <td>Application Number</td> <td>10/042,402</td> </tr> <tr> <td>Filing Date</td> <td>January 7, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Bardy</td> </tr> <tr> <td>Art Unit</td> <td>3762</td> </tr> <tr> <td>Examiner Name</td> <td>Unassigned</td> </tr> <tr> <td>Attorney Docket Number</td> <td>020.0254.US.CON</td> </tr> </table>		Application Number	10/042,402	Filing Date	January 7, 2002	First Named Inventor	Bardy	Art Unit	3762	Examiner Name	Unassigned	Attorney Docket Number	020.0254.US.CON
Application Number	10/042,402																
Filing Date	January 7, 2002																
First Named Inventor	Bardy																
Art Unit	3762																
Examiner Name	Unassigned																
Attorney Docket Number	020.0254.US.CON																
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>																	
Sheet	1	of	1														

[illegible][illegible]

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

Burden Hour Statement: This form is not intended to take 20 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Alexandria, VA 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Mail Stop IDS, PO Box 1450, Alexandria, VA 22313-1450.**



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

3762

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/042,402	
	Filing Date	January 7, 2002	
	First Named Inventor	Bardy, Gust H.	
	Group Art Unit	3762	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission		Attorney Docket Number	020.0254.US.CON

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement and Transmittal Letter <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1 Published Reference Postcard RECEIVED OCT 01 2003 TECHNOLOGY CENTER R3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Law Offices of Patrick J.S. Inouye
Signature	
Date	September 22, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop IDS, PO Box 1450, Alexandria, VA 22313-1450 on this date:			
Type or printed name	Larissa V. Pigott	Date	September 22, 2003
Signature		Date	September 22, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Mail Stop IDS, PO Box 1450, Alexandria, VA 22313-1450.